

PATENT
THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	Brian Hernacki	Examiner:	Paul E. Callahan	
Application No.:	10/628,006	Art Unit:	2137	
Filed:	July 25, 2003	Docket No.	SYMAP027	
Title:	PROTOCOL INDENTIFICATION BY MEANS OF HEURISTIC CONTENT ANALYSIS			

## **CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in a prepaid envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on:

<u>11/13</u>, 2007.

## TRANSMITTAL OF AMENDMENT B

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

NOV 16 2007

Transmitted herewith is Amendment B in response to Office Action mailed June 26, 2007 in the above-identified application.

The fee has been calculated as shown below.

CLAIMS	After Amd.	HP*	Extra	Small Enti	ty		Large Entity	
CLATIVIS			LAUA	Rate	Fee		Rate	Fee
Total	16	22	-0-	x \$25 = \$		OR	x \$50 = \$	
Independent	3	4	-0-	x \$105 = \$		OR	x \$210 = \$	
Multiple Dependent Claims				x \$185 = \$		OR	x \$370 = \$	
*HP = Highest p	previously paid			TOTAL FEE\$		OR	TOTAL FEE \$	-0-

Applicant(s) hereby petition for following extension of time in which to respond to the outstanding Office Action.

		SMALL ENTITY			LARGE ENTITY	
		Rate	Add'l Fee		Rate	Add'l Fee
Extension for Response within FIRST month		x \$60 = \$		OR	x \$120 = \$	
		x \$230 = \$		OR	x \$460 = \$	460.00
Extension for Response within THIRD month	"	x \$525 = \$	·	OR	x \$1050 = \$	
☐ Extension for Response within FOURTH month		x \$820. = \$		OR	x \$1640 = \$	
☐ Extension for Response within FIFTH month		x \$1115 = \$		OR	x \$2230 = \$	

Attorney Docket No. :SYMAP027 Application No.: 10/628,006

be gran	nined that such an extension is require	onal) Extension of Time is required; however, if it is ed, Applicant(s) hereby petition that such an extension to charge the required fees for an Extension of Time o. 50-0685. (SYMAP027).				
⊠ fee and	Enclosed is our Check No. 3335 in addor extension of time fees.	the amount of \$460.00 to cover the additional claim				
	Enclosed is Applicant Initiated Inter	rview Request Form, PTOL-413A.				
	Enclosed aresheets replace	ement drawings.				
 \$	Please charge Deposit Account No. 50-0685 (SYMAP027) in the amount of to cover the additional claim fee and/or extension of time fees.					
	-	ny additional fees are required during the pendency of fees or credit any overpayment to Deposit Account				
	OTHER:					
		Respectfully submitted, VAN PELT, YI & JAMES LLP				
		William J. James Registration No. 40,661				

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